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ABSTRACT

This report describes Head Start preschool programs in Broward County, Florida, and examines the goals, expected outcomes, and parental satisfaction levels of the programs. It is based on interviews with program staff, federal and local reports, telephone surveys of parents of 57 randomly selected first-graders who attended Head Start in the county in 1993-94, and surveys of teachers and parents of 50 randomly selected first-graders who attended Head Start in the county in 1991-92. The findings suggest that program staff continue to provide a high quality preschool experience for children of low-income families, as well as ensuring medical and dental screening and follow-up for children of disadvantaged families who might not otherwise have sought access to such services. In addition, the families reported satisfaction with the support offered to them by Head Start staff. Five appendixes provide county-wide Head Start data and the results of parent and teacher surveys. (Contains 24 references.) (MDM)

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EXECUTIVE SUMMARY
HEAD START

Program Description

Head Start is a federally-funded program designed to provide preschool children of low-income families with comprehensive programs and services. The children are placed in a preschool environment that gives them a "head start" in education.

Head Start has been one of the primary mechanisms for delivering health, education, and family services in low-income communities. Head Start is tied to Goal 1 of Florida's Blueprint 2000: "Readiness to Start School." Additionally, the Head Start program addresses one of Broward County Public School's Major System Priorities: "Improving Student Achievement and School Effectiveness."

In Broward County during the 1993-94 school year, 1,613 preschool children participated in the Head Start program in 42 elementary schools. The families of these students were at or below the federal poverty line of $14,350 for a family of four before enrollment (Department of Health and Human Services, 1993). According to Broward County district staff, waiting list for Head Start eligible students numbered 628 in 1993-94.

Goal of the Report

The goal of this report is to describe the Head Start Program and to present evaluation outcomes. The following research questions are addressed:

1. What are the goals and expected outcomes of the Head Start Program?

2. What degree of satisfaction is expressed by families that participate in the Head Start Program?

Findings

Most former and current participants in Head Start report satisfaction with the program. Based on parent survey results, the program is meeting the goals of providing access to high-quality preschool. The goal of social competency is more nebulous and difficult to determine, as are the measures of a child's everyday effectiveness in dealing with both the present environment and later responsibilities in school and life.

Along with readiness to start school, Head Start targets social competence and social services including: parent involvement, education and employment and health impact.

The analyses of local Head Start data have not revealed a link between program participation and school effectiveness.

Recommendations

1. As Head Start is to target parent involvement, education and employment, emphasis shall be placed in recruiting parents to

participate in parent education, as paid staff, and as Head Start volunteers.

2. In the area of social service need identification and resource follow-up, Head Start staff shall develop a plan to identify and cultivate partnerships to respond to families of students enrolled in Head Start. Partnerships shall be formed with agencies offering services to families of preschool at-risk students to ensure more responsive service delivery. Initiatives shall be school and home linked as well as rooted in the community.

3. A plan for providing a continuum of comprehensive support services beyond Head Start participation shall be developed to ensure sufficient duration of prevention programs that will increase the likelihood of long term gains. The plan shall include social and health services, as well as academic and behavioral support.

4. An annual summary of Head Start accomplishments, obstacles, and program data shall be submitted by the program staff to the Superintendent and the School Board. This information will serve as backup to the annual application for funding.

5. The present focus on children currently receiving Head Start Services must be expanded to include children on the waiting list not receiving services. Every effort must be made to vigorously pursue Federal funding in order to provide high-quality pre-school services to all eligible children and their families.

THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA
RESEARCH AND EVALUATION

Head Start Program

The purpose of this document is to report on the findings and recommendations of the Head Start Program as implemented in Broward County Public Schools (BCPS), FL. The program provides preschool children of low-income families with comprehensive programs and services in an educational setting to give them a "head start" in education. The evaluation includes information gathered through: a) literature review, b) interviews with selected program staff, c) review of pertinent federal and local reports, documents, and correspondence, d) contact with the staff of the U.S. Department of Health and Human Services (HHS), e) telephone surveys of parents of randomly selected children who attended the Head Start Program in 1993-94), and f) surveys of teachers and parents of randomly selected first graders who attended the Head Start Program in 1991-92. The findings suggest that BCPS Head Start program staff continues to provide a high-quality preschool experience for children of low income families ensuring medical and dental screening and follow-up for children of disadvantaged families who might not have otherwise sought access to these services. In addition, families report satisfaction with the support offered to them through Head Start staff.

Introduction

Project Head Start began as an eight-week summer program in 1965 (HHS, 1993). During the past 28 years, the program has served over 13.1 million children and their families nationwide (Head Start Bureau, 1993). Head Start is administered by approximately 1,400 community-based non-profit organizations (Head Start Bureau, 1993); 19% of which are sponsored by the public school system (HHS, 1993).

Head Start eligibility requirements are more stringent than many other federal programs (National Head Start Association, 1990). To be eligible for Head Start a child must be living in a family whose income is below the federal poverty line, currently $14,350 for a family of four (HHS, 1993). Locally, children must also exhibit at least one additional risk factor to be eligible.

In Florida, Head Start is tied to one of the State's goals of Blueprint 2000: "Readiness to

Start School." Head Start also addresses one of BCPS' Major System Priorities: "Improving Student Achievement and School Effectiveness."

National Research Findings

Initially, Head Start was enthusiastically received by educators, child development specialists, community leaders, and parents across the nation as a means of increasing the intelligence of at-risk children from low income families. However, early evaluations relying upon changes in intelligence test performance to ascertain the program's impact on children found initial gains were short lived (McKey et al., 1985; Peters, 1980; Travers & Light, 1982; Zigler & Rescorla, 1985). This led some to deem Head Start a wasted effort jeopardizing funding for the program (Datta, 1979). Consequently, many policy makers and researchers began to lose faith in intelligent quotient (IQ) as a barometer of Head Start's effectiveness. Policymakers and researchers changed the focus from IQ gains to school performance as the indicator for the impact of Head Start.

Schweinhart (1985), in testimony before the Subcommittee on Human Resources Education and Labor Committee of the U.S. House of Representatives, and Halpern and Meyers (1985) summarizing seven longitudinal studies report there is strong evidence that participation in high quality, early childhood programs for poor children have significant short-term and long-term effects on school achievement and progress. Halpern and Meyers measured progress with promotion rates, special education placement rates, and high school completion data. Additionally, a recently published 21 year study conducted by staff at the University of North Carolina, Chapel Hill, reported academic gains for Head Start participants who were studied from birth through age 15 (Campbell & Ramsey, 1993).

Program Background

Broward County Public Schools staff initiated a summer Head Start program in 1965 for 1,000 low income students including 500 children of migrant families. In 1968 the program was expanded to a year-round program. During these years Head Start operated under the direction of the Community Action Agency. Head Start was housed in churches and vacant stores and annually served approximately 340 children before the responsibility for the program returned to the BCPS in 1976.

Beginning in 1988-89 several incremental, significant changes were made in Head Start programs. For the first time all Head Start teachers were required to hold a college

degree and to be certified with an academic concentration in early childhood education. In 1989-90 the local Department of Child Development was formed and charged with the responsibility of the Head Start program. That same year the Head Start curriculum was standardized through the adoption of the High/Scope model emphasizing social competence and language development. The High/Scope curriculum uses a specially developed curriculum that relies heavily on active, child-initiated learning experiences during which children plan, or express their intentions; carry out their intentions in play experiences; and then reflect on their accomplishments (Educational Research Service, 1993). The 1989-90 school year was a transition year involving training, full implementation and the provision of basic equipment. This was followed by in-house changes the next year. The social service component was also upgraded in 1992 to include master's level social workers; parent educators who assist families with parenting skills, social competence of students, and information and referral for families to appropriate social service agencies; and reduction of caseloads through the increase of staff.

During the 1993-94 school year, the BCPS Head Start program was funded for 1507 children for which it provided services at any one time (1,613 children were served due to turnover), an increase from the 1047 children served at any one time (1,172 in all) in 1992-93 (see Attachment A for data provided by the local Head Start program for the federal audit). As of August 1, 1993, 628 children remained on the waiting list.

Program Description

Each year the community is notified of the availability of Head Start programs for economically disadvantaged four-year-olds. The locations are publicized, and parents apply for the site of their choice. The applications are processed by the BCPS Department of Child Development staff, and the applicants are rank ordered based on income level and one or more other at-risk factors. At-risk factors include families of single parents or guardians; teen parents; foster care, protective service, or government entitlement recipients; limited English proficiency; the disabled; neo-natal intensive care graduates; parents without a high school or graduate equivalency diploma; working parents in need of day care; and those continuing with programs administered by the Department of Child Development. Children are accepted into the program by

school according to their ranking until all available slots are filled. As one school's Head Start program is filled, a student may be directed to another school offering the program.

Head Start programs operate in 42 elementary schools as listed in Attachment B. The 1,507 participants are educated in 75 classes of 20 students to one teacher and one instructional aide. In addition, there is one integrated class wherein seven Head Start students are enrolled in a program serving Exceptional Student Education (ESE) preschool students. The Head Start classes mirror the schedule followed by the school in which the program is housed - six hours per day (excluding the half hour for breakfast), 180 days per year. The program operates under the direction of the school principal with support of area and district personnel.

Approximately one-third of students in the district are black; the Head Start program's composition over the last three years for which the federal government collected data is 79% black. The remaining participants averaging the last three years are 11% white and 9% Hispanic compared to over half of district's student body being white and over 10% Hispanic. Approximately 1.5% of Head Starters are Asian or American Indian compared to 2.23% of the district's population as a whole.

Cost Impact

According to Department of Child Development staff the 1993-94 approved budget under Amendment 2 for the Broward Head Start program totals $8,423,000. Federal funding provided $6,738,400 of the approved budget with the district requirement of a 20% match contributing $1,684,600.

Purpose of the 1993-94 Evaluation Report

The intention of this report is to address the following questions:

1. What are the goals and expected outcomes of the Head Start Program?

2. What degree of satisfaction is expressed by families that participate in the Head Start Program?

Methods

Participants

Students, parents and teachers participated in the evaluation study including:

- 50 randomly selected first grade students who formerly attended Head Start in Broward County (1991-92).

- Parents and teachers of the 50 randomly selected first

grade students whose children attended Head Start in Broward County during 1991-92 (see Attachment C and D for a copy of the survey and survey results).

- Parents of 57 randomly selected students who attended the Head Start Program in school year 1993-94 (see Attachment E for a copy of the survey and survey results).

Data Collection and Availability

Information concerning the Head Start program was obtained from an extensive literature review, the review of pertinent federal and local documents, telephone contact with staff of the U.S. Department of Health and Human Services, Washington, D.C. and interviews with local Head Start staff. Telephone and mail surveys targeting selected students presently or formerly served by Head Start were used to collect qualitative data.

Results

What are the goals and expected outcomes of the Head Start Program?

Head Start targets social competence; social services; parent involvement, education and employment; and health impacts. For purposes of this study, each area will be addressed.

A. Social Competence

As defined by HHS (1984), social competence is the child's everyday effectiveness in dealing with both the present environment and later responsibilities in school and life.

National Findings. A third party evaluation conducted by the University of Florida College of Medicine (1993) reported that parents state Head Start enhanced the social development of their children. Specifically, they indicated that their children learned to follow rules, get along with other children, and become more independent while in the Head Start program.

Local Findings.

Parents currently receiving Head Start services suggest several reasons for sending their children to Head Start. Over half indicated that they enrolled their children in the program for educational opportunity, while over one-third indicated socialization was a main concern. Nearly one-fourth of the parents surveyed indicated they use Head Start for daycare purposes. Nearly one-half of the children would be home, approximately one-third in daycare and over 10% with a babysitter during the day if

they were not currently in Head Start, as reported by their parents.

Better than half of the first grade teachers surveyed indicate that former Head Start graduates demonstrate basic social skills and 94% indicate that the students successfully handle school routine. Less than 10% of the students are reported to have a poor self-concept, and about one-fourth of the teachers indicate that their former Head Start students exhibit behavior problems.

B. Social Services

National Findings. U.S. Secretary of Education Richard Riley and Secretary of Health and Human Services Donna Shalala characterize the current system of programs serving children as "fragmented, confusing, and inefficient." Many state and private foundations are forming collaboratives to initiate more responsive child and family services. Their combined experience suggests that effective service integration initiatives are school linked and are rooted in the community closely connected to state government (Educational Research Services, 1993).

Local Findings. As illustrated in Attachment A, nearly all the families with children enrolled in Head Start completed a needs assessment in each of the last five years. In 1993-94, 43% indicated a need for social services, yet less than half of those received the indicated services (43% or 295). Although these figures reflect a significant decline over 1992-93 figures wherein of the 833 families needing social services, 94% (779) actually received the services, according to program staff this is due largely to the redefinition of the term "received." In the past received services included such services as a holiday basket. In 1993-94 the definition of received services went beyond assessment and referral to include remediation of the need. Staff indicate that 100% of those in need of services have had those needs addressed as documented by their Family Needs Assessment Form. However, when those needs are such as housing or financial the resources do not locally exist to meet that need.

Over 60% of parents whose children had participated in Head Start indicated that they were told where to receive help in the community while nearly 39% state they were not informed. According to program staff, every parent is given a resource guide at the time of a documented visit requiring the parents' signature. Ten percent of the first grade teachers of former Head Start students report that students and their families

could presently benefit from referral to social services.

C. Parent Involvement, Education and Employment

National Findings. One focus of Head Start is to maximize the strengths and unique experiences of each child and family. Parents are seen as the principle influence on their children's development and are direct participants and decision-makers in the program (HHS, 1993).

Local Findings. Ongoing parent-Head Start staff communication is evidenced in the findings of this report. Ninety-three percent of the parents currently receiving Head Start services report their child's teacher has contacted them this year with an average of one contact every three days. Nearly three-fourths report attending meetings with the Head Start teacher while nearly half state a visit has been made by the teacher to their home. In addition to teacher contacts, nearly three-fourths of the parents indicate they were contacted by a Head Start social worker, parent educator, or someone else affiliated with the program. Nearly three-fourths of the parents also report that they are able to talk to someone at Head Start about problems they have at home.

Parent and teacher survey results suggest that parent involvement continues beyond the Head Start years. First grade teachers of Head Start graduates indicate that over three-fourths of the parents have contacted them about their child's performance and 86% of the parents have attended at least one teacher conference this year.

According to information provided in Attachment A, as many as 70% (1992-93) and as few as 37% (1990-91) of the parents of Head Start participants were involved in parent education in each of the last five school years.

Nearly half of the parents of former students indicate that Head Start staff assisted them with their parenting skills, three-fourths of which report they are single parents.

The data from Head Start's Program Information Report is consistent with the information provided by parents who participated in the survey, that between one-third to one-half of Head Start children have at least one parent who is employed. Among the services reported to be offered to parents by Head Start is help with education and employment skills. Nearly one-fourth of the parents of former Head Start students indicate that Head Start staff assisted them with job skills while over half indicate the staff did not provide assistance. Over half of

the parents currently receiving Head Start services report receiving help with employment skills and nearly three-fourths indicate they have received assistance with information or encouragement regarding adult education.

Over the past three years, the number of parents employed as paid staff and those volunteering in Head Start classes has steadily decreased (see Attachment A).

D. Health Impact

National Findings. More than 30 Head Start studies have targeted data on health impact. National studies consistently indicate that children attending Head Start were more likely to get medical and dental exams than children who did not participate in the preschool program.

Local Findings. Federal reports prepared by BCPS staff demonstrate that identified health needs of children enrolled in Head Start were provided to all the preschoolers in 1993-94 including immunizations, medical treatment and dental treatment. However, parents report that 82.5% (47) of the families receiving Head Start services in 1993-94 indicate their children have received a medical exam while only approximately 60% indicate their child has received a dental exam. This discrepancy appears to be as a result of the parents lack of knowledge regarding all the services their children receive through the Head Start program especially as staff reports 100% of the children receive dental screening in class. According to first grade teachers of children previously in Head Start, none currently have unaddressed medical or dental needs.

What degree of satisfaction is expressed by families that participate in the Head Start Program?

National Findings. A May, 1990 study convened by the Silver Ribbon Panel of the National Head Start Association found that 90% of the parents spontaneously indicated a positive program effect on their children and many spoke of improvements in the parent-child relationship.

Local Findings. Much like the national findings, parents who currently receive Head Start services in Broward County are satisfied with the program. Ninety-three percent of the parents participating in the telephone survey indicated they would give the Head Start program and the teachers a grade of A or B. Only one parent gave Head Start a grade lower then a C. All of the parents indicated their children enjoyed attending the Head Start program. Likewise, 100% of the parents using Head Start services in 1993-94 indicated

they think the program will prepare their child for kindergarten or first grade.

Four parents expressed dissatisfaction with the program. They either stated a concern with the breakfast schedule, disagreement with staff identification of a special needs child, or dissatisfaction with the teacher.

Discussion

Head Start staff should be commended for offering a high quality preschool program to enhance the early experiences of low-income children. Most former and current participants in Head Start report satisfaction with the program. Based on the information gathered from the parents surveyed, the program is meeting its goal of providing access to high-quality preschool for low income families. Further, Head Start staff are to be praised for ensuring medical and dental screening and follow-up for children of disadvantaged families who might not have otherwise sought access to these services.

The four major components within the Head Start Program are social competency; social services; parent involvement, education, and employment; and health impact. Each is addressed in present programming. Head Start is a primary mechanism for delivering health, education, and family services in low-income communities.

The recently released national report regarding Head Start prepared by the Advisory Committee on Head Start Quality and Expansion (1993) includes a recommendation to strengthen the role of research. The report suggests that Head Start adopt the role as a national laboratory for best practices in early childhood and family support services in low-income communities. Among the actions recommended are:

- build a strong and enduring infrastructure for Head Start research to ensure that Head Start is able to carry out its leadership role on an ongoing basis.
- conduct longitudinal research on children and families served in Head Start programs.
- Expand the partnership between research and practitioners by encouraging better communication and better utilization of data.

Recommendations

1. As Head Start is to target parent involvement, education and employment, emphasis shall be placed in recruiting parents to participate in parent education, as paid staff, and as Head Start volunteers.

2. In the area of social service need identification and resource follow-up, Head Start staff shall develop a plan to identify and cultivate partnerships to respond to families of students enrolled in Head Start. Partnerships shall be formed with agencies offering services to families of preschool at-risk students to ensure more responsive service delivery. Initiatives shall be school and home linked as well as rooted in the community.

3. A plan for providing a continuum of comprehensive support services beyond Head Start participation shall be developed to ensure sufficient duration of prevention programs that will increase the likelihood of long term gains. The plan shall include social and health services, as well as academic and behavioral support.

4. An annual summary of Head Start accomplishments, obstacles, and program data shall be submitted by the program staff to the Superintendent and the School Board. This information will serve as backup to the annual application for funding.

5. The present focus on children currently receiving Head Start Services must be expanded to include children on the waiting list not receiving services. Every effort must be made to vigorously pursue Federal funding in order to provide high-quality pre-school services to all eligible children and their families.

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Attachment A

THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA
Head Start Data

	1989-90	1990-91	1991-92	1992-93	1993-94
Actual Enrollment	563 *	900*	1067*	1172 *	1613 *
Funded Enrollment	520 (92%)	807 (90%)	947 (89%)	1047 (89%)	1507 (93%)
Classes	26	37	44	49	76**
Black			848 (79%)	1022 (87%)	1140 (71%)
Hispanic			102 (10%)	19 (2%)	254 (16%)
White			99 (9%)	131 (11%)	234 (14%)
Other			18 (2%)	0	21 (1%)
Disabilities	60 (11%)	70 (8%)	97 (9%)	94 (8%)	151 (9%)
Immunizations	523 (93%)	874 (97%)	1117*	1152 (98%)	1613 (100%)
Medical Screening	523 (93%)	852 (95%)	1027 (96%)	947 (81%)	1451 (90%)
Needing Treatment	124	187	43	231	226
Begun/Completed Treatment	206*	164 (88%)	43 (100%)	231 (100%)	226 (100%)
Completed Dental Exam	503 (89%)	869 (97%)	958 (90%)	1089 (93%)	1604 (99%)
Needing Treatment	173	345	286	372	970
Begun/Completed Treatment	173 (100%)	322 (93%)	286 (100%)	372 (100%)	970 (100%)
Completed Needs Assessment	558 (99%)	824 (92%)	1041 (98%)	1028 (88%)	1569 (97%)
Needs Social Services	510 (91%)	624 (69%)	831 (78%)	833 (71%)	688 (43%)
Received Social Services	492 (96%)	581 (93%)	783 (94%)	779 (94%)	295 (43%)
Paid Staff	67	97	112	132	188
Parents as Paid Staff	1	11	10	6	5
Volunteers	224	279	480	344	335
Parents As Volunteers	203	173	372	344	297
Involved in Parent Education	318 (56%)	337 (37%)	630 (59%)	819 (70%)	862 (53%)

*All figures include children who were enrolled but dropped out before services were received, including home-based sessions.

**75 classes of 20 and one integrated class of seven added to ESE students.

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Attachment B

THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA

School-Based Preschool Programs

1993-94

School	# Classes	# Waiting List
Bennett	1	15
Bethune	1	12
Broadview	4	
Broward Estates	1	16
Castle Hill	1	40
Colbert		23*
Collins	3	
Cresthaven	2	1
Croissant Park	2	17
Cypress	1	24
Davie	2	13
Deerfield Beach	1	
Deerfield Park	2	
Dillard	1	
Driftwood	1	
Edgewood		3*
Foster, Stephen	2	
Hallandale	3	3
Hollywood Park	1	8
Hunt	1	52
King, Martin Luther	2	46
Lake Forest	4	
Larkdale	1	
Lauderdale Manors	1	
Lauderhill, P.T.	1	49
Markham	2	5
Meadowbrook	2	4
North Fork	2	1
North Lauderdale		14*
North Side	1	21
North Side Annex	2	
Oakland Park	1	6
Oakridge	1	8
Orange Brook	2	11
Park Ridge		19*
Riverland	1	11
Rock Island	5	8
Royal Palm	2	83
Sanders Park	3	
Sheridan Park	2	
Sunland Park	2	
Sunshine	1	17
Tedder		30*
Walker	2	31
Watkins	1	12
West Hollywood	4	
Westwood Heights		12*
Wilton Manors	1	13
# of Actual Students	**1613**	**NA**
# of Classes	**76**	**N/A**
TOTAL	**N/A**	**628**

*Some schools maintain a wait list even though they do not offer Head Start as they do offer state funded Pre-K integrated Early Intervention services

* Lake Forest has 3 regular Head Start Classes and 1 integrated class of 7 students mixed with ESE.

BEST COPY AVAILABLE

Attachment C

THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA
OFFICE OF PROGRAM EVALUATION/RESEARCH

Parent/Guardian First Grade Survey
Winter 1993-94

1. Did your child attend the Head Start Program?
   45(90%) Yes 1(2%) No 4(8%) MISSING

   If yes, How many days per week? _____

2. Does your child like school this year?
   45(90%) Yes 0 No 3(2%) Unsure 4(8%) Missing

3. Do you think the Head Start program was good for your child?
   42(84%) Yes 0 No 8(4%) Unsure 4(8%) Missing

4. Do you feel the Head Start program helped to ready your child for school?
   44(88%) Yes 2(4%) No 0 Unsure 4(8%) Missing

5. Have you met with the teacher at your child's school this year?
   45(90%) Yes 1(2%) No 4(8%) Missing

6. Is your child doing well in school?
   41(82%) Yes 1(2%) No 3(6%) Unsure 5(10%) Missing

- not due to Head Start
- much progress from kindergarten

7. Do you feel the Head Start program helped you with your parenting skills?
   26(52%) Yes 13(26%) No 6(12%) Unsure 5(10%) Missing

8. Did Head Start assist you in continuing your education?
   20(40%) Yes 25(50%) No 5(10%) Missing

9. Did Head Start assist you with job skills?
   12(24%) Yes 27(54%) No 5(10%) Unsure 6(12%) Missing

10. Did Head Start tell you about any help you could receive from other community agencies?
    29(58%) Yes 17(34%) No

11. Did your child get medical or dental services through Head Start?
    33(66%) Yes 9(18%) No 4(8%) Unsure 4(8%) Missing

12. What are your overall feelings about Head Start?
    40(80%) Good 6(12%) Unsure 0 Bad 4(8%) Missing

13. Is there anything else you would like us to know about Head Start?

- I would not have been able to afford a preschool program and my child would not be ready for a school setting.
- keep it
- the program was okay for my child. Please don't send me anything else as silly as this; a waste of time and paper.
- child is doing very well and achieving in all subject areas.
- my child loved going to Head Start and it met her needs.
- its a very good program for the parents and students in the community.
- I think Head Start should be available to all children. It gives them a chance to learn about sharing, taking care of other people, property and being independent at an early age. I think it was a fantastic experience for me as well as my son.
- this program should be offered at all schools as well as open to all children.
- The program needs to be supervised by the district so that more have a better chance to attend and the waiting list is not so long.
- I am very pleased with the Head Start program.
- I liked the program but had a problem with the teacher who needed more patience with children. The teacher threatened both me and my child and I had to call the police and later move.
- Head Start teachers are more caring and understanding than some of the "regular" teachers

Attachment D

THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA
OFFICE OF PROGRAM EVALUATION/RESEARCH

First Grade Teacher Survey for Selected Students
Winter 1993-94

N= 50

The Office of Program Evaluation/Research is conducting a review of "selected" students' readiness to start first grade. This information is being used to help us better understand the effectiveness of early childhood intervention programs.

Please answer the questions in this survey as they pertain to the following student:

TEACHER NAME:
STUDENT NAME:
SCHOOL:

SA	Strongly Agree
A	Agree
U	Unsure
D	Disagree
SD	Strongly Disagree

Please check (√) one response for each item.

	SA	A	U	D	SD
1. This student was ready for first grade.	18(36%)	20(40%)	3(6%)	8(16%)	1(2%)
2. This student is achieving at the same pace as other students in my class.	15(30%)	21(42%)	10(20%)	4(8%)	0
3. This student is able to handle school routine such as use of the cafeteria, going to the library, catching the bus, etc.	24(48%)	23(46%)	1(2%)	1(2%)	1(2%)

HS, 9/94

	SA	A	U	D	SD
4. This student has behavior problems.	5(10%)	8(16%)	0	24(48%)	13(26%)
5. This student demonstrates basic social skills:	12(24%)	32(64%)	2(4%)	4(8%)	0
• child is very polite and quiet but gets along with other students.					
6. This student has a poor self-concept.	4(8%)	3(6%)	0	25(50%)	18(36%)
7. This student is eager to learn.	20(40%)	18(36%)	6(12%)	5(10%)	1(2%)
• sometimes child is motivated to learn and sometimes expends very little effort					
8. This student has obvious, unaddressed medical/dental problems.	0	0	4(8%)	25(50%)	21(42%)
9. This student/family would benefit from referral to social services.	0	5(10%)	15(30%)	20(40%)	10(20%)

Please check (√) one response

10. This student was ready for the first pre-primer in:

31(62%)	SEPTEMBER 93
16(32%)	JANUARY 94
0	MARCH 94
03(06%)	NOT YET READY

- late October
- November

11. The parent(s) contacted me about this student's performance.

38(76%) YES 12(24%) NO

- parents were contacted

12. The parent(s) attended at least one teacher conference.

43(86%) YES 07(14%) NO

13. Please list the special programs or services this student is currently receiving.

- none
- ESOL
- Chapter 1
- speech
- receives extra assistance in small group settings
- child is in the focus reading series. He has access to computers, CDIs and manipulatives. Positive reinforcement is used to help with his behavior
- referred to child study
- extra help in the classroom
- modified reading assignments
- after school care

14. Please use the space below to make any comments or suggestions which you feel should be considered by staff who are evaluating early childhood intervention programs.

Specific comments:

- this is a lovely child; kind, highly motivated and hard working
- I am concerned this child is obese which is very unhealthy
- child is an average student who started slowly at the beginning of the year.
- child has problems in the areas of reading, spelling, peer pressure, behavior, poor social skills. His immaturity aggravates his ability to learn and behave.
- child is unorganized and has trouble paying attention
- child is bright and was well prepared for the first grade. He has a wonderful personality but does not like to be corrected for inappropriate behavior. He is immature but it does not cause him difficulty.
- child has been referred to the child study team. She entered the first grade not knowing her ABCs, sounds, etc. She has made very

slow progress even though she gets a lot of help in small groups. She has trouble staying on task and in her seat and is easily distracted.

- child showed strong school readiness skills as a result of the early intervention program. The program serves as a tool to alert teachers of expectations.
- child's involvement in "your" program substantially affected her readiness for first grade. She is doing well in all academic and social areas of our curriculum.

General comments:

- a lot of attention should be paid to language usage, development and understanding or comprehension; especially for minority and bilingual children.
- I think early intervention is wonderful
- staff should consider emphasizing and developing oral communication skills as well as written skills.
- continuous follow-up and evaluation are necessary in order to assess children such has this one. Although he probably benefited from "your" program, his family life and economic status demands future intervention.
- building of self-esteem is the most important factor. When a child feels good about himself, learning new things becomes less threatening.
- this child has greatly benefited from being in Head Start. The top 10% of my class are composed of children who have benefited from the Head Start program.
- the program is very beneficial, however, there are still children not ready for first grade. I feel it depends on the child and the parental support.
- We need more preschool programs. Given the background of many of our children a very large percentage need early intervention. We also need classes to teach parenting skills early on.

Attachment E

THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA
OFFICE OF PROGRAM EVALUATION

PARENT/GUARDIAN TELEPHONE SURVEY
STUDENTS ATTENDING HEAD START 1993-94

N= 57

ID# _____
RELATIONSHIP OF INTERVIEWEE ____

THE QUESTIONS I'M ASKING YOU, HAVE TO DO WITH YOUR CHILD _____

1. How did you find out about Head Start?

   Family 10 (17.5%) Friend 16 (28.1%) School 16 (28.1%)
   Sibling 07 (12.3%) Other 08 (14%)

   - Aware of program in Chicago
   - flyers

2. What attracted you to the Head Start Program?

   35 (61.4%) EDUCATIONAL OPPORTUNITY
   16 (28.1%) ECONOMICS
   06 (10.5%) LOCATION

   - its cheap
   - cannot afford daycare
   - child has speech problem; parent wanted interaction with others
   - wanted child in different environment
   - exposure
   - social

3. How many days per week does your child attend Head Start?

   5 days/57 (100%)

4. Does your child enjoy attending school?

   57 (100%) YES _____ NO _____ UNSURE

5. Do you have any other children that have gone to Head Start?
   12 (21.1%) YES 45 (78.9%) NO

6. Do you think Head Start will help your child be ready for kindergarten and first grade?

   57 (100%) YES _____ NO _____ UNSURE

7. Has your child received a medical exam this year?

   47 (82.5%) YES 10 (17.5%) NO _____ UNSURE

8. Has your child received dental services through Head Start?

   34 (59.6%) YES 19 (33.3%) NO 04 (7%) UNSURE

9. Has Head Start told you where you can receive help in the community?

   35 (61.4%) YES 22 (38.6%) NO

   - did not need
   - hand outs only
   - child has a problem with her feet. Mother was told she would be contacted but nothing has happened.

10. If your child was not in Head Start what would (s)he be doing?

    Baby-sitter 05 (8.8%) Daycare 20 (35.1%) Friend 01 (1.8%)
    Home 27 (47.4%) Relatives 01 (1.8%) Other 03 (5.3%)

    - would send child home to Grenada

11. Has the Head Start teacher contacted you?

    53 (93%) YES 03 (5.3%) NO 01 (1.8%) Don't Know

    - constantly
    - always informed

    If YES how?

    24 (42.1%) Sent a note home
    18 (31.6%) Telephoned
    41 (71.9%) Met with you
    25 (43.9%) Other _____
    - home visit

27

How many times? _____

- constantly
- regularly
- daily
- numerous
- every now and then

12. Has anyone other one than your child's teacher contacted you from Head Start?

41 (71.9%) YES 16 (28.1%) NO

If YES, whom?

Parent Ed.	04	(7%)
Soc Worker	18	(31.6%)
Doesn't Know	11	(19.3%)
Other	04	(7%)
Missing	04	(7%)
Answered No	16	(28%)

13. Are you able to talk to someone at Head Start about problems that you have with your child at home?

41 (71.9%) YES 08 (14%) NO 01 (1.8%) UNSURE

7 (12.3%) NO NEED

14. Are you employed?

16 (28.1%) FULL TIME 08 (14%) PART TIME 33 (57.9%) NO

15. Has Head Start worked with you on employment skills?

37 (64.9%) YES 20 (35.1%) NO

- received literature
- has not asked
- would welcome information

16. Has Head Start worked with you on your education?

41 (71.9%) YES 16 (28.1%) NO

- language
- received literature

17. Who lives in the home with you and your ch

16 (28.1%) OTHER PARENT
2.24 mean NUMBER OF SIBLINGS
2.05 mean NUMBER OF OTHER PEOPLE

16. If you were to give a grade to Head Start, what grade would you give?

43 (75.4%) A
10 (17.5%) B
02 (03.5%) C
00 D
01 (01.8%) F
01 (1.8%) MISSING

- Breakfast schedule is too early (7:30-7:55)
- great program, A++
- has not had much contact
- teachers are wonderful, program is helpful
- program is okay, child is a bit difficult to deal with
- child withdrawn from program because Head Start claims she is mentally handicapped. Parent does not believe this is so.
- great program
- mother does not feel child is receiving full advantage of the program. She is not happy with the teacher (child has had two since he started). Mother claims that at this time last year her other child was able to write his name whereas this child does not know how.